

Leadership & Professional Development: Be the Change You Want to See

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"...a truly strong, powerful man isn't threatened by a strong, powerful woman. Instead, he is challenged by her, he is inspired by her, he is pleased to relate to her as an equal."

—Michelle Obama

Mentorship is essential to success in hospital medicine and may be particularly important for women. Cross-gender mentorship is especially salient since roughly equal proportions of women and men enter the medical pipeline, but men occupy over 75% of senior leadership roles in healthcare companies.

Cross-gender mentorship poses challenges but can be done successfully.¹ We've made cross-gender mentoring work well in our own mentoring relationship. We describe three practices for effective mentoring that are especially important for men who mentor women given how common the female mentee-male mentor dyad is in medicine. We make generalizations that don't apply universally but illustrate the social context in which such mentorship resides.

BE MINDFUL OF GENDER SCRIPTS

Gender scripts refer to social norms relating to gender identities and behaviors. Archetypal scripts include the father/daughter relationship and the knight/damsel-in-distress. Gender scripts often frame women as powerless—waiting to be rescued. By unconsciously activating a gender script, a mentor may reinforce a stereotype that women need rescuing (eg, "She's really upset—I'll email her Division Chief and help fix it for her") or underestimate a mentee's readiness for independence (eg, "She's written four papers on this, but she's still not ready to be senior author"). Astute mentors use reflection to combat gender scripts, asking themselves, "Am I allowing latent biases to affect my judgement?" They also consider when to intervene and when to let the mentee "rescue" herself (eg, "This is challenging, but I trust your judgement. What do you think you should do next?").

PROMOTE RECIPROCAL LEARNING

Many women value collaborative behaviors and gravitate towards egalitarian learning environments at odds with a tradition-

al, "top-down" mentorship model. Additionally, women may be penalized for demonstrating competitive behaviors, while identical behaviors are chalked up to confidence in men. A critical task, then, is for mentors to coach women to hone their natural leadership style, whether it be more commanding or more communal. A mentor can provide key feedback to the mentee about how her approach might be perceived and how to tweak it for optimal success. Mentors may wish to share missteps and even ask the mentee for advice. Pointing to her competence promotes "relational mentoring" and reciprocal learning, where mentor and mentee can learn positive behaviors from each other.

BE THE CHANGE YOU WANT TO SEE

Mentors will ideally wield their social capital to advance policies that promote gender equity—including fair recruiting, promotion, salary, paid leave, and breastfeeding policies. Exceptional mentors recognize that women may generally have less social capital than men in many organizations, and they proactively make women's accomplishments more visible.² They broadcast women's strengths and nominate women for talks, national committees, honorific societies, and leadership positions. Effective mentors recognize that 30% of female medical faculty report experiencing sexual harassment at work,³ and thus maintain extremely high standards for professional integrity, for both themselves and others who interact with their mentees. They call out sexist remarks in the workplace as unacceptable, making it clear that such behavior won't be tolerated. As Mohandas Gandhi said: "Be the change that you wish to see in the world."

Cross-gender mentorship is critical to get right—nearly half our medical workforce depends on it. Men who mentor women help their organizations and gain satisfaction from playing a pivotal role in women's advancement. When women succeed, we all do.

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